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This Form Based on PTO/SB/21

|  |  |                        |               |
|--|--|------------------------|---------------|
| <b>TRANSMITTAL FORM</b><br><i>(to be used for all correspondence after initial filing)</i> |  | Application Number     | 10/623,809    |
|  |  | Filing Date            | July 22, 2003 |
|  |  | First Named Inventor   | KINO et al.   |
|  |  | Group Art Unit         |               |
|  |  | Examiner Name          |               |
|  |  | Attorney Docket Number | 26B-014-CIP   |

| ENCLOSURES (check all that apply)   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment / Response<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers<br><i>(for an Application)</i><br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition<br><input type="checkbox"/> To Convert a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Small Entity Statement<br><input type="checkbox"/> Request of Refund | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group<br><i>(Appeal Notice, Brief, Reply Brief)</i><br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Additional Enclosure(s)<br><i>(please identify below):</i><br><div style="border: 1px solid black; padding: 5px;">Declaration and Power of Attorney</div> <div style="border: 1px solid black; height: 40px;"></div> <div style="border: 1px solid black; height: 40px;"></div> |
| <div style="border: 1px solid black; padding: 5px;">Remarks</div>   |  |   |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |   |
|--|---|
| Firm or Individual name                    | David G. Posz (Reg. No. 37,701)<br>Posz & Bethards, PLC                             |
| Signature                                  |  |
| Date                                       | January 27, 2004  |